## FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

		Г	or All Authorized Coll	militee		Office Use Only
1.	NAME OF COMMITTEE (in			Example:If typing, type over the lines		
LB	ill Shuster for C	ongress				
Ш						
AD	DRESS (number a	and street)	Box 27			
	Check if diff than previou reported. (A	sly	daysburg		<u> PA</u> L	16648
2.	FEC IDENTIFICA	ATION NUMBER	▼ CITY ▲	I	STATE	ZIP CODE 🛋
	C0036493	5	3. IS THIS REPORT	X NEW (N) O	R AMEND (A)	STATE T DISTRICT
4.		eports:	(b) 12-Day <b>P</b>	RE-Election Report for t Primary (12P) Convention (12C)	he: General (1	
		Quarterly Report (C r 15 Quarterly Repo		n 05 1	6 2006	in the PA State of
	Januar	y 31 Year-End Repo	rt (YE) (c) 30-Day <b>P</b>	OST-Election Report for	the:	
	Termin	ation Report (TER)	Election o	General (30G)	Runoff (30	Special (30S) in the State of
5.	Covering Period	0 4	01 2006	through	04 26	2006
	ertify that I have exa	•	nd to the best of my knowle Frederick A Ciocca	dge and belief it is true, o	correct and complete.	
Sig	nature of Treasure	r Electronically F	led by Frederick A Cic	occa	Date 0 4	27 2006
NO	TE : Submission o	f false, erroneous, o	r incomplete information ma	y subject the person sign	ning this Report to the p	penalties of 2 U.S.C 437g.
	Office Use					FEC FORM 3 (Revised 02/2003)

## Image# 26960083112

## **SUMMARY PAGE**

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003) Page 2 Write or Type Committee Name Bill Shuster for Congress ° D 0 1 0 4 From: 0 4 2006 26 2006 Report Covering the Period: To: **COLUMN B COLUMN A This Period Election Cycle-to-Date** Net Contributions (other than loans) (a) Total Contributions 1500.00 566871.12 (other than loans) (from Line 11(e))...... (b) Total Contribution Refunds .00 900.00 (from Line 20(d))..... (c) Net Contributions (other than loans) 1500.00 565971.12 (subtract Line 6(b) from Line 6(a))....... 7. Net Operating Expenditures (a) Total Operating Expenditures 20056.28 463428.14 (from Line 17)..... (b) Total Offsets to Operating .00 4812.30 Expenditures (from Line 14)..... (c) Net Operating Expenditures 20056.28 458615.84 (subtract Line 7(b) from Line 7(a))....... Cash on Hand at Close of 102624.53 Reporting Period (from Line 27)..... 9. Debts and Obligations Owed TO the Committee (Itemize all on .00 Schedule C and/or Schedule D)..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 7620.51 Schedule C and/or Schedule D).....

### For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

FEC Form 3 (Revised 02/2003)

## **DETAILED SUMMARY PAGE**

of Receipts

Page 3

Write or Type Committee Name Bill Shuster for Congress D D Report Covering the Period: 0 4 2006 04 2006 0 1 26 From: To: **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 1500.00 259450.00 (i) Itemized (use Schedule A)..... .00 10115.00 (ii) Unitemized..... (iii) TOTAL of contributions 1500.00 269565.00 from individuals..... .00 .00 (b) Political Party Committees..... (c) Other Political Committees .00 297306.12 (such as PACS)..... .00 .00 (d) The Candidate..... (e) TOTAL CONTRIBUTIONS (other than loans) 1500.00 566871.12 (add Lines 11(a)(iii), (b), (c), and (d)) 12. TRANSFERS FROM OTHER .00 .00 AUTHORIZED COMMITTEES..... 13. LOANS (a) Made or Guaranteed by the .00 .00 Candidate..... .00 440000.00 (b) All Other Loans..... (c) TOTAL LOANS 440000.00 .00 (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** .00 4812.30 (Refunds, Rebates, etc.).... 15. OTHER RECEIPTS .00 .00 (Dividends, Interest, etc.)..... 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...... 1500.00 1011683.42

FEC Form 3 (Revised 02/2003)

## **DETAILED SUMMARY PAGE**

of Disbursements

Page 4

**COLUMN A COLUMN B II. DISBURSEMENTS Total This Period Election Cycle-to-Date** 20056.28 463428.14 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER .00 .00 AUTHORIZED COMMITTEES..... 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed .00 2000.00 by the Candidate..... .00 450000.00 (b) Of all Other Loans..... (c) TOTAL LOAN REPAYMENTS .00 452000.00 (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other .00 900.00 Than Political Committees..... .00 .00 (b) Political Party Committees..... (c) Other Political Committees .00 .00 (such as PACs)..... (d) TOTAL CONTRIBUTION REFUNDS .00 900.00 (add Lines 20(a), (b), and (c))..... 9362.03 54818.71 21. OTHER DISBURSEMENTS..... 22. TOTAL DISBURSEMENTS 29418.31 971146.85 (add Lines 17, 18, 19(c), 20(d), and 21) III. CASH SUMMARY 130542.84 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...... 1500.00 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3)..... 132042.84 25. SUBTOTAL (add Line 23 and Line 24)..... 29418.31 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD 102624.53 (subtract Line 26 from Line 25).....

	CHEDULE A (FEC Form 3 ) EMIZED RECEIPTS	)	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 5 / 26 (check only one)    X
Any or f	y information copied from such Reports and or commercial purposes, other than using t	Statements may he name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
١.	NAME OF COMMITTEE (In Full) Bill Shuster for Congress			
۹.	Full Name (Last, First, Middle Initial) Christopher E Bossi Mailing Address 405 Granada Way			Date of Receipt
	City	State	Zip Code	0 4 2 4 2 0 0 6  Transaction ID: SA11Ai-CN4946
	Altoona	PA	16601	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer	Occupation	n	Limit Increased Due to Opponent's
	Receipt For: 2006  X Primary General  Other (specify) ▼	Election C	cycle-to-Date ▼ 1500.00	Spending (2 U.S.C. 441a(i)/441a-1)
3.	Full Name (Last, First, Middle Initial) JED Associates			Date of Receipt
	Mailing Address 4961 Cumberland H	wy		04 10 2006
	City	State	Zip Code	Transaction ID: SA11Ai-CN4941
	Chambersburg FEC ID number of contributing federal political committee.	C	17201	Amount of Each Receipt this Period  1000.00
	Name of Employer	Occupation	n	Divided between the 3 partners Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006  X Primary General  Other (specify)	Election C	cycle-to-Date ▼ 1000.00	Opending (2 0.0.0. 441a(i))441a 1)
_	Full Name (Last, First, Middle Initial) Edwin D Martin	<b>-</b>		Date of Receipt
	Mailing Address 4961 Cumberland H	wy		04 10 2006
	City	State	Zip Code	Transaction ID: SA11Ai-CN4942
	Chambersburg  FEC ID number of contributing federal political committee.	C	17201	Amount of Each Receipt this Period  333.34
	Name of Employer JED Associates	Occupation Excavator	n or/Partner	Partnership contribution- JED Associates Limit Increased Due to Opponent's
	Receipt For: 2006  X Primary General  Other (specify)	Election C	Sycle-to-Date ▼ 333.34	Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] \$333.34 MEMO Partnership Attributed
SI	JBTOTAL of Receipts This Page (optional)			1500.00
тс	OTAL This Period (last page this line numb	er only)	<b>)</b>	

X Primary

Other (specify)

General

PAGE 6/26 FOR LINE NUMBER: SCHEDULE A (FEC Form 3) Use separate schedule(s) (check only one) or each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 12 13a 13b 15 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Bill Shuster for Congress Full Name (Last, First, Middle Initial) Date of Receipt Jeryl L Martin Mailing Address 4961 Cumberland Hwy 0.4 10 2006 City State Zip Code Transaction ID: SA11Ai-CN4943 Chambersburg PA 17201 Amount of Each Receipt this Period FEC ID number of contributing 333.33 C federal political committee. Partnership contribution-JED Associates Name of Employer JED Associates Occupation Limit Increased Due to Opponent's Excavator/Partner Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM] Receipt For: 2006 Election Cycle-to-Date X Primary General -\$333.33 MEMO Partnership Attributed 333.33 Other (specify) Full Name (Last, First, Middle Initial) B. David Henry Martin Date of Receipt Mailing Address 4961 Cumberland Hwy 0.4 10 2006 City State Zip Code Transaction ID: SA11Ai-CN4944 Chambersburg PA 17201 Amount of Each Receipt this Period FEC ID number of contributing C 333.33 federal political committee. Partnership contribution-JED Associates Name of Employer JED Associates Occupation Excavator/Partner Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) Receipt For: 2006 Election Cycle-to-Date [MEMO ITEM]

333.33

SUBTOTAL of Receipts This Page (optional)	<b>•</b>	0.00
TOTAL This Period (last page this line number only)	<b>•</b>	1500.00

\$333.33 MEMO Partnership Attributed

ııayı	5# 20900003117							
		B (FEC Form 3 SBURSEMEN	· 1	for each	erate schedule(s) category of the Summary Page	FOR LIN (check or	E NUMBER: nly one)  X 17 18 20a 20b	PAGE 7/26  19a 19b 20c 21
		ed from such Reports rposes, other than usir						
$\rangle$	NAME OF COMI Bill Shuster for	, ,						
Α.	US Postal Ser	First, Middle Initial) vice					Date of Disburse	SB17-EX4092 ement
	Mailing Address	525 Allegheny S					0 4 0	2006
	City Hollidaysburg			State PA	Zip Code 16648		Amount of Each	Disbursement this Period
	Purpose of Disbu Postage Candidate Name		001 Category/	Refund or Di Contributions 11 C.F.R. 40	sposal of Excess s Required Under			
	Office Sought: State:	House Senate President District:	Disburser	ment For: Primary Other (spe	2006 General	Туре	Administrative/ rhead Expense	/Salary/Ove-
В.		First, Middle Initial)					Transaction ID: Date of Disburse	SB17-EX4124 ement
	Mailing Address	525 Allegheny S	04 2	2006				
	City Hollidaysburg			State PA	Zip Code 16648		Amount of Each	Disbursement this Period
	Purpose of Disbu Postage Candidate Name			001 Category/ Type		78.00 sposal of Excess s Required Under 0.53		
	Office Sought:	House Senate President District:	Disburser X	ment For: Primary Other (spe	2006 General		Administrative/ rhead Expense	/Salary/Ove- es
C.		First, Middle Initial)					Date of Disburse	
	Mailing Address	301 Allegheny S	Street				04 2	1
	City Hollidaysburg			State PA	Zip Code 16648		Amount of Each	Disbursement this Period
	Purpose of Disbu Office Expenses Candidate Name		001 Category/ Type		4.88 sposal of Excess Required Under 0.53			
	Office Sought: State:	House Senate President District:	Disburser X	nent For: Primary Other (spe	2006 General	715-5	Administrative/ rhead Expense	/Salary/Ove- s
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242.88

SUBTOTAL of Disbursements This Page (optional) .....

	CHEDULE B (FEC Form 3 ) EMIZED DISBURSEMENTS	Use seperate schedule(s) for each category of the Detailed Summary Page	(check only	NUMBER: PAGE 8 / 26 / one)  X 17			
	y Information copied from such Reports and Statem for commercial purposes, other than using the name			or the purpose of solicating contributions			
	NAME OF COMMITTEE (In Full) Bill Shuster for Congress	, , , , , , , , , , , , , , , , , , ,					
Α.	Full Name (Last, First, Middle Initial) State Farm Insurance  Mailing Address 715 Lexington Avenue			Transaction ID: SB17-EX4107 Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	City Altoona	State Zip Code PA 16601		Amount of Each Disbursement this Period 300.00			
	Purpose of Disbursement Insurance Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53			
	Senate X President	ement For: 2006 Primary General Other (specify)		Administrative/Salary/Ove- rhead Expenses			
	State: District:						
В.	Full Name (Last, First, Middle Initial) Sheetz Inc			Transaction ID: SB17-EX4117 Date of Disbursement			
	Mailing Address 5700 Sixth Avenue		$\begin{bmatrix} M & M \\ 0 & 4 \end{bmatrix}$ $\begin{bmatrix} D & D \\ 2 & 1 \end{bmatrix}$ $\begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{bmatrix}$				
	•	State Zip Code PA 16602		Amount of Each Disbursement this Period			
	Purpose of Disbursement Vehicle Expenses	001	29.00  Refund or Disposal of Excess				
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53			
	9 🔲 1 —	ement For: 2006 Primary General Other (specify)		Administrative/Salary/Ove- rhead Expenses			
С.	Full Name (Last, First, Middle Initial) Sheetz Inc			Transaction ID: SB17-EX4122 Date of Disbursement			
	Mailing Address 5700 Sixth Avenue			04 4 21 7 2006			
		State Zip Code PA 16602		Amount of Each Disbursement this Period			
	Purpose of Disbursement Vehicle Expenses		001	30.00 Refund or Disposal of Excess			
	Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53				
		ement For: 2006 Primary General Other (specify)		Administrative/Salary/Ove- rhead Expenses			
_	State: District:	- ·					
s	UBTOTAL of Disbursements This Page (optional) .		<b>)</b>	359.00			

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							on for the purpose of solica solicit contributions from s	
Λ	NAME OF COMM	/IITTEE (In Full)						
17	Bill Shuster for	Congress						
<u></u>	Full Name (Leat I	First, Middle Initial)						
A.	Staples-291 Alt						Transaction ID: SE  Date of Disburseme	nt
	Mailing Address	Plank Road/Orcl	hard Plaza	a			04  21	<sup>'</sup> 2006 <sup>'</sup>
	City Altoona			tate PA	Zip Code 16602		Amount of Each Dis	bursement this Period
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	Full Name (Last, I	First, Middle Initial)					Transaction ID: SE	
В.	Capitol Hill Clu	b					Date of Disburseme	nt
	Mailing Address 300 First Street SE						04	Ž O O G
	City			tate	Zip Code		Amount of Each Dis	bursement this Period
	Washington DC 20003						_	75.87
	Purpose of Disbursement Meals						Refund or Dispo	
	Candidate Name					Category/ Type	Contributions Re 11 C.F.R. 400.5	equired Under
	Office Sought:	House Senate	Disbursen	nent For: Primary	2006 General		Travel Expenses	
		President		Other (spe				
	State:	District:		` .	, <b>,</b>			
C.		First, Middle Initial) ille					Transaction ID: SE Date of Disburseme	-
	Mailing Address	601 Pennsylvani	ia Avenue	, NW			04	y 2006
	City Washington			tate OC	Zip Code 20004		Amount of Each Dis	bursement this Period
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	Candidate Name					003 Category/ Type	Refund or Dispo Contributions Re 11 C.F.R. 400.5	equired Under
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	y Information copied from such Reports and Statem for commercial purposes, other than using the name					5			
$\overline{\ \ }$	NAME OF COMMITTEE (In Full)								
/	Bill Shuster for Congress								
۹.	Full Name (Last, First, Middle Initial) IS2 Technologies, Inc.				Transaction ID: SB17-EX4138 Date of Disbursement				
	Mailing Address 3018 Pleasant Valley Blv	04 M / 21 / Y 2006	Y						
	,	State PA	Zip Code 16602		Amount of Each Disbursement this P	eriod			
	Purpose of Disbursement Office Expenses	001	71.0 Refund or Disposal of Excess	)2					
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53				
	Senate X President	ment For: Primary Other (spe	2006 General	Administrative/Salary/Ove- rhead Expenses					
3.	Full Name (Last, First, Middle Initial) Schoenbergers Restaurant	Transaction ID: SB17-EX4125 Date of Disbursement							
	Mailing Address 346 Lincoln Way East	04 7 21 7 2006	Y						
		State PA	Zip Code 17201		Amount of Each Disbursement this P	eriod			
	Purpose of Disbursement Meals			002	536.2  Refund or Disposal of Excess	24			
	Candidate Name			Category/ Type	11 C E D 400 52				
	· —	ment For: Primary Other (spe	2006 General		Travel Expenses				
	State: District:								
Э.	Full Name (Last, First, Middle Initial) US Hotel Restaurant				Transaction ID: SB17-EX4134 Date of Disbursement				
	Mailing Address 401 South Juniata Street				04	Y			
		State PA	Zip Code 16648		Amount of Each Disbursement this P	eriod			
	Purpose of Disbursement Meals	72.5  Refund or Disposal of Excess	50						
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53				
		ment For: Primary Other (spe	2006 General		Travel Expenses				
	State: District:		•						
s	UBTOTAL of Disbursements This Page (optional) .				679.7	6			

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	y Information copied from such Reports and Staten for commercial purposes, other than using the nam											
$\setminus$	NAME OF COMMITTEE (In Full)											
V	Bill Shuster for Congress											
Α.	Full Name (Last, First, Middle Initial) Advantage Inc					Transaction ID: SB17-EX4141 Date of Disbursement						
	Mailing Address 1611 N Kent Street Suite	905				04						
	City Arlington	State VA	Zip Code 22209			Amo	unt c	f Eac	h [	Disbur	emei	nt this Period
	Purpose of Disbursement Media				004	331.52  Refund or Disposal of Excess						
	Candidate Name		ategory/ Type	Contributions Required Under 11 C.F.R. 400.53								
	Senate X President	ement For: Primary Other (spe	2006 General			Advertising Expenses						
	State: District:											
B.	Full Name (Last, First, Middle Initial) Bull Feathers							ion II isbur		SB17- ment	EX4	133
	Mailing Address 410 First Street SE						. M	/ D	2	D /	Y	2006
	City Washington	State DC	Zip Code 20003			Amo	unt c	f Eac	h [	Disbur	eme	nt this Period
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	Candidate Name				ategory/ Type	Contributions Required Under 11 C.F.R. 400.53				nder		
		ement For: Primary Other (spe	2006 General	•		Trav	el E	xpen	se	s		
	State: District:											
C.	Full Name (Last, First, Middle Initial) American Express					Transaction ID: SB17-EX4136 Date of Disbursement			136			
	Mailing Address PO Box 360002					o <sup>M</sup> 4	. M	/ D	2	D /	Y	2006
	City Fort Lauderdale	State FL	Zip Code 33335			Amo	unt c	f Eac	h [	Disbur	semei	nt this Period
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	Office Sought: House Disburse Senate X		7.5-	Adm rhea	inist d Ex	rativ pens	e/S	Salary	/Ove	<del>)</del> -		
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	y Information copied from such Reports a for commercial purposes, other than using					
Ν	NAME OF COMMITTEE (In Full)					
$\angle$	Bill Shuster for Congress					
_	Full Name (Last, First, Middle Initial)					Transaction ID: SB17-EX4114
Α.	US Members Dining Room					Date of Disbursement
	Mailing Address H-117, The Capi HOB Rayburn Bl					$\begin{bmatrix} \begin{smallmatrix} M & A & M \\ O & A & M \end{smallmatrix} & \begin{smallmatrix} D & D & D \\ D & D & D \end{smallmatrix} & \begin{smallmatrix} Y & Y & Y & O & O & O \\ Y & Z & O & O & O & O \end{bmatrix}$
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	Washington Purpose of Disbursement		DC	20515		55.00
	Meals				002	Refund or Disposal of Excess
	Candidate Name				Category/	Contributions Required Under
					Туре	11 C.F.R. 400.53
	Office Sought: House Senate	Disburser	nent For: Primary	2006 General		Travel Expenses
	President		Other (spe			
	State: District:		(-	- <i>57</i> , <b>\</b>		
_	Full Name (Last, First, Middle Initial)					Transaction ID: SB17-EX4118
В.	Benjamin Hotel		Date of Disbursement			
	Mailing Address 125 East 50th Si		$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 4 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & O & O & O \\ Y & Z & O & O & O \end{bmatrix} $			
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	Candidate Name		Category/	Contributions Required Under		
					Type	11 C.F.R. 400.53
	Office Sought: House	Disburser		2006		Travel Expenses
	Senate President	X	Primary Other (spe	General		
	State: District:		Other (spe	city) ₩		
	Full Name (Last, First, Middle Initial)					Transaction ID: SB17-EX4144
C.	Covington & Burling					Date of Disbursement
	Mailing Address 1201 Pennsylvan	nia Avenu	ıe, NW			$\begin{bmatrix}\begin{smallmatrix}M&4&M\\0&4&\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}D&2&5\\&2&5\end{smallmatrix}]/\begin{bmatrix}\begin{smallmatrix}Y&Y&Y&0&0&6\\&2&0&0&6\end{smallmatrix}$
	City		State	Zip Code		Amount of Each Disbursement this Period
	Washington		DC DC	20004		Attributed of Edelt Biobardenters that I ched
	Purpose of Disbursement					7500.00
	Legal Consultant				001	Refund or Disposal of Excess Contributions Required Under
	Candidate Name				Category/ Type	11 C.F.R. 400.53
	Office Sought: House	Disburser	ment For:	2006	71: -	Administrative (Calary (Core
	Senate		Primary	General		Administrative/Salary/Ove- rhead Expenses
	President		Other (spe	ecify)		•
_	State: District:					
s	UBTOTAL of Disbursements This Page	optional)			<b>.</b>	8632.76

S	CHEDULE B (FEC Form 3)		FORLINE	NUMBER: DAGE 10 / 00					
	EMIZED DISBURSEMENTS	Use seperate schedule(s for each category of the	) (check only	NUMBER: PAGE 13 / 26 / one)					
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	y Information copied from such Reports and Stater for commercial purposes, other than using the nam								
$\overline{\ }$	NAME OF COMMITTEE (In Full)								
	Bill Shuster for Congress								
۹.	Full Name (Last, First, Middle Initial) ATLANTIC broadband			Transaction ID: SB17-EX4108 Date of Disbursement					
	ATEANTIO DIOAGDATIO								
	Mailing Address 2200 Beale Avenue			$\begin{bmatrix} 0 & 4 & M \\ 0 & 4 & M \end{bmatrix} / \begin{bmatrix} D & D & D \\ 1 & 1 & D \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{bmatrix}$					
	City Altoona	State Zip Code PA 16601		Amount of Each Disbursement this Period					
	Purpose of Disbursement Utilities		004	54.02					
	Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53					
		ement For: 2006 Primary General Other (specify)		Administrative/Salary/Ove- rhead Expenses					
	Full Name (Last, First, Middle Initial)			Transaction ID: SB17-EX4109					
3.	ATLANTIC broadband			Date of Disbursement					
	Mailing Address 2200 Beale Avenue	$\begin{bmatrix} M & M & M \\ O & 4 & M \end{bmatrix} / \begin{bmatrix} D & D & D \\ 1 & 1 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{bmatrix}$							
	City Altoona	State Zip Code PA 16601		Amount of Each Disbursement this Period					
	Purpose of Disbursement Utilities		001	103.95  Refund or Disposal of Excess					
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53					
	° 🗎 –	ement For: 2006 Primary General Other (specify)		Administrative/Salary/Ove- rhead Expenses					
	Full Name (Last, First, Middle Initial)			Transaction ID: SB17-EX4142					
Э.	CenPenn Realty LLC			Date of Disbursement					
	Mailing Address 513 Allegheny Street		$\begin{bmatrix} 0 & 4 & M \\ 0 & 4 & M \end{bmatrix}$ $\begin{bmatrix} 0 & 2 & 5 \\ 0 & 2 & 5 \end{bmatrix}$ $\begin{bmatrix} 1 & 1 & 2 & 0 & 0 & 6 \\ 0 & 2 & 0 & 0 & 6 \end{bmatrix}$						
	City Hollidaysburg	State Zip Code PA 16648		Amount of Each Disbursement this Period					
	Purpose of Disbursement	500.00							
	Rent Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53					
	Senate X President	ement For: 2006 Primary General Other (specify)		Administrative/Salary/Ove- rhead Expenses					
_	State: District:								
s	UBTOTAL of Disbursements This Page (optional)		<b>&gt;</b>	657.97					

nage	e# 26960083124									
S	CHEDULE B	(FEC Form 3	)	l Ise sene	erate schedule(s)		NUMBER: PAGE 14/26			
IT	EMIZED DIS	BURSEMENT	ΓS	for each	category of the Summary Page	(check on	y one)			
							for the purpose of solicating contributions blicit contributions from such committee			
	NAME OF COMMI Bill Shuster for 0	TTEE (In Full)	<u> </u>							
Α.	Full Name (Last, Fi	rst, Middle Initial)	Transaction ID: SB17-EX4146							
	Jim Frank						Date of Disbursement  0 4 2 5 2 0 0 6			
	Mailing Address	1628 St. Francis	Lane				04 25 2006			
	City Altoona			State PA	Zip Code 16602		Amount of Each Disbursement this Period			
	Purpose of Disburs Vehicle Expenses	sement				001	92.00			
	Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53						
	Office Sought:	House Senate President		nent For: Primary Other (spe	2006 General		Administrative/Salary/Ove- rhead Expenses			
		District:								
В.	Full Name (Last, First, Middle Initial)  Jim Frank  Mailing Address 1628 St. Francis Lane						Transaction ID: SB17-EX4147 Date of Disbursement  M M M D 2 5 Y 2 0 0 6			
	City Altoona			Amount of Each Disbursement this Period						
	Purpose of Disburs Meals Candidate Name	sement		002 Category/	Refund or Disposal of Excess Contributions Required Under					
	Office Sought:    House						11 C.F.R. 400.53  Travel Expenses			
C.	Full Name (Last, Fi S&T Bank	rst, Middle Initial)					Transaction ID: SB17-EX4095 Date of Disbursement			
	Mailing Address	208 West Plank	$\begin{bmatrix} M & M $							
	City Altoona		S		Amount of Each Disbursement this Period					
	Purpose of Disburs Bank Service Char Candidate Name			001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53					
	Office Sought:	House Senate President		nent For: Primary Other (spe	2006 General	712	Bank Service Charge			

256.68

 $\blacktriangleright$ 

State:

District:

SUBTOTAL of Disbursements This Page (optional) .....

···ug\	5# 20900003123									
		B (FEC Form 3	·		erate schedule(s)		NE NUMBER: only one)	PAGE 15 / 26		
П	EMIZED DIS	SBURSEMEN'	TS		category of the Summary Page	(0	X 17 18 20a 20b	19a 19b 20c 21		
		ed from such Reports rposes, other than usir					on for the purpose of	solicating contributions		
$\vdash$	NAME OF COMM	MITTEE (In Full)								
$\rangle$	Bill Shuster for	, ,								
_	Full Name (Last,	First, Middle Initial)					Transaction I	<b>D</b> : SB17-EX4156		
Α.	S&T Bank		Date of Disbu	rsement						
	Mailing Address	208 West Plank	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$							
	City Altoona			State PA	Zip Code 16602		Amount of Each Disbursement this Period			
	Purpose of Disbu	rsement					<del>.</del>	12.48		
	Payroll Taxes					001 Refund or Disposal of Excess				
	Candidate Name		Category/ Type	Contribution 11 C.F.R.	ons Required Under 400.53					
Office Sought: House Disbursement For: 2006 Senate X Primary General rhead President Other (specify) ▼								/e/Salary/Ove- ses		
	State:	District:			, <b>,</b>					
		First, Middle Initial)					Transaction I	<b>D</b> : SB17-EX4128		
В.	Cingular Wirele	ess					Date of Disbu	rsement		
	Mailing Address	PO Box 6416	04	21 2006						
	City Carol Stream			State L	Zip Code 60197		Amount of Ea	ch Disbursement this Period		
	Purpose of Disbu	rsement			63.59					
	Telephone				001	Disposal of Excess				
	Candidate Name			Category/ Type	Contribution 11 C.F.R.	ons Required Under 400.53				
	Office Sought:	House	Disburser		2006		Administrativ	ve/Salary/Ove-		
		Senate		Primary	General		rhead Expen	/e/Salary/Ove- ses		
	State:	President District:		Other (spe	ecify) 🔻					
		First, Middle Initial)					Transaction I	<b>D</b> : SB17-EX4145		
C.	Cingular Wirele	ess					Date of Disbu	rsement		
	Mailing Address	PO Box 6416					04	25 7 2006		
	City Carol Stream			State L	Zip Code 60197		Amount of Ea	ch Disbursement this Period		
	Purpose of Disbu	rsement					<del>,</del> L	220.28		
	Telephone Candidate Name						Contribution	Disposal of Excess ons Required Under		
			11 C.F.R.	400.33						
	Office Sought:	House Senate	Disburser	nent For: Primary	2006 General		Admin <u>is</u> trativ	/e/Salary/Ove-		
		Senate President		Other (spe			rhead Expen	ses		
	State:	District:		5or (ope	j/ ▼					

296.35

SUBTOTAL of Disbursements This Page (optional) .....

nage# 20300003120		
SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS	Use seperate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 26 (check only one)    X   17
		y any person for the purpose of solicating contributions ommittee to solicit contributions from such committee
NAME OF COMMITTEE (In Full) Bill Shuster for Congress		
Full Name (Last, First, Middle Initial)  A. Jeffrey Loveng  Mailing Address 228 W. Windsor Avenue	e	Transaction ID: SB17-EX4103 Date of Disbursement  O 4
City Alexandria Purpose of Disbursement Taxi/Car/Bus Expense	State Zip Code VA 22301	Amount of Each Disbursement this Period  229.00  Refund or Disposal of Excess
	ement For: 2006  (Primary General Other (specify)	Category/ Type  Contributions Required Under 11 C.F.R. 400.53  Travel Expenses
Full Name (Last, First, Middle Initial)  B. Jeffrey Loveng  Mailing Address 228 W. Windsor Avenue	9	Transaction ID: SB17-EX4104 Date of Disbursement  M M M / D D D / Y Y Y O O 6
City Alexandria Purpose of Disbursement Meals Candidate Name	State Zip Code VA 22301	Amount of Each Disbursement this Period  146.39  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
• 🗎	ement For: 2006 Primary General Other (specify)	Travel Expenses
C. Jeffrey Loveng  Mailing Address 228 W. Windsor Avenue	9	Transaction ID: SB17-EX4105 Date of Disbursement  M 4 M / D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
· -	State Zip Code VA 22301  ement For: 2006 Primary General Other (specify)	Amount of Each Disbursement this Period  367.09  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  Travel Expenses
SUBTOTAL of Disbursements This Page (optional)		742.48

$\sim$								
	HEDULE B (FECF) MIZED DISBURSE	•	for each o	rate schedule(s) ategory of the Summary Page	(check onl	NUMBER: PAGE 17 / 26 y one)  X 17 18 19a 19b 20a 20b 20c 21		
						for the purpose of solicating contributions solicit contributions from such committee		
1 \	NAME OF COMMITTEE (In File in Street (In File in File in Congress)	(111)						
Α.	Full Name (Last, First, Middle I e2c consulting, Inc.	nitial)				Transaction ID: SB17-EX4143 Date of Disbursement		
N	Mailing Address PO Box	29576				$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 5 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{smallmatrix} \end{bmatrix}$		
	Dity Washington		State DC	Zip Code 20017		Amount of Each Disbursement this Period		
C	Purpose of Disbursement Campaign Consultant Candidate Name				003 Category/	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
Ċ	Office Sought: House Senate Preside	X	ement For: Primary Other (spec	2006 General	Туре	Solitication and Fundraising Expenses		
	State: District:			<i></i>				
<b>B</b> . 5					Transaction ID: SB17-EX4132 Date of Disbursement  O 4			
_	Mailing Address 223 Pennsylvania Avenue SE							
V	City Washington		State DC	Zip Code 20003		Amount of Each Disbursement this Period  1496.25		
N	Purpose of Disbursement Meals Candidate Name				002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
Ċ	Office Sought: House Senate Preside	X	ement For: Primary Other (spec	2006 General	311-1	Travel Expenses		
	State: District:							
_	Full Name (Last, First, Middle I Sunny's Executive Sedan (	,				Transaction ID: SB17-EX4112 Date of Disbursement		
N	Mailing Address 4312 36t	h Street				04 / 21 / 2006		
	City Long Island City		State NY	Zip Code 11101		Amount of Each Disbursement this Period		
Ţ	Purpose of Disbursement Taxi/Car/Bus Expense				290.7  Refund or Disposal of Excess			
C	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53		
Ċ	Office Sought: House Senate Preside	X	ement For: Primary Other (spec	2006 General		Travel Expenses		
S	State: District:							

SUBTOTAL of Disbursements This Page (optional) .....

## Image# 26960083128

City

Meals

State:

New York

## SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Senate President

District:

FOR LINE NUMBER: PAGE 18 / 26 Use seperate schedule(s) (check only one) for each category of the Detailed Summary Page 17 18 19b 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicating contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) Bill Shuster for Congress Full Name (Last, First, Middle Initial) Transaction ID: SB17-EX4115 Il Cortile Restaurant Date of Disbursement 2 1 o<sup>™</sup>4 2006 Mailing Address 125 Mulberry Street State Zip Code Amount of Each Disbursement this Period NY 10013 205.00 Purpose of Disbursement 002 Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: Disbursement For: 2006 House

General

X Primary

Other (specify)

Travel Expenses

SUBTOTAL of Disbursements This Page (optional)	<b>•</b>	205.00
TOTAL This Period (last page this line number only)	•	18910.25

SCHEDULE B (FEC Form 3)					EOD LINE	NUMBER: PAGE 19/26								
	EMIZED DISBURSEN	-		erate schedule(s) category of the			k only one)		. 19/20	_				
-	EMIZED DISBURSEN	MEN I S	Detailed	Summary Page					_	_	19b ( 21			
	ny Information copied from such Re for commercial purposes, other th													
Ν	NAME OF COMMITTEE (In Full	)												
/	Bill Shuster for Congress													
Α.	Full Name (Last, First, Middle Initial) Juniata Co Republican Comm.			Date	of D	isburs	ser							
	Mailing Address 4 Industria	al Park Road					0 4	М	/ D	1	<b>1</b> /	Y	2006	
	City Mifflintown		State PA	Zip Code 17059			Amou	ınt o	f Eac	h [	Disburs	eme	nt this Period	i
	Purpose of Disbursement Promotional Tickets					012					posal c			_
	Candidate Name					ategory/ Type			butior F.R. 4		Requir 0.53	ed U	nder	
	Office Sought: House Senate President	X	ement For: Primary Other (spe	2006 General			Dona	tion	S					
	State: District:													
В.	Full Name (Last, First, Middle Initial) Blair Co Republican Committee			Transaction ID: SB21-EX4096 Date of Disbursement										
	Mailing Address 513 Allegh	neny Street					0 4	М	/ D	1	D /	Y	2006	
	City Hollidaysburg		State PA	Zip Code 16648			Amou	ınt o	f Eac	h [	Disburs	eme	nt this Perioc	ı
	Purpose of Disbursement Promotional Tickets					012	400.00  Refund or Disposal of Excess			_				
	Candidate Name					ategory/ Type			butior F.R. 4		Requir 0.53	ed U	nder	
	Office Sought: House Senate President	X	ement For: Primary Other (spe	2006 General			Dona	tion	S					
	State: District:													
C.	Full Name (Last, First, Middle Ini Bedford Co. Republican Co						Trans Date				SB21- ment	EX4	097	
	Mailing Address 675 Smith	Road					0 <sup>M</sup> 4	М	/ D	1	D /	Y	2006	
	City Schellsburg		State PA	Zip Code 15559			Amou	ınt o	f Eac	h [	Disburs	eme	nt this Period	j
	Purpose of Disbursement												250.00	
	Promotional Tickets Candidate Name				Ca	012 ategory/ Type	C	ontri		าร	posal c Requir 0.53			
	Office Sought: House Senate	X	ement For:	2006 General		75-7	Dona	tion	S					
	State: President District:		Other (spe	ecify) <b>▼</b>										
s	SUBTOTAL of Disbursements This	s Page (optional)				▶							770.00	

SCHEDULE B (FECFORIII 3 )	Lica canarata canadula(c)	OR LINE NUMBER: PAGE 20 / 26
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	heck only one)  17 18 19a 19b 20a 20b 20c X 21
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name		
NAME OF COMMITTEE (In Full) Bill Shuster for Congress		
Full Name (Last, First, Middle Initial)  Mifflin Co Republian Committee  Mailing Address PO Box 961		Transaction ID: SB21-EX4098 Date of Disbursement  0 4
	State Zip Code PA 17044	Amount of Each Disbursement this Period
Purpose of Disbursement Promotional Tickets Candidate Name	01 Categ	gory/ Contributions Required Under
	ment For: 2006 Primary General Other (specify)	Donations
Full Name (Last, First, Middle Initial)  3. Somerset Co Republican Comm		Transaction ID: SB21-EX4099 Date of Disbursement
Mailing Address PO Box 401		0 4 M / D 1 D / Y 2 0 0 6 Y
Somerset	State Zip Code PA 15501	Amount of Each Disbursement this Period 200.00
Purpose of Disbursement Promotional Tickets Candidate Name	01 Cate	Refund or Disposal of Excess Contributions Required Under
9 🗎	ment For: 2006 Primary General Other (specify)	Donations
Full Name (Last, First, Middle Initial) Friends Of Senator Jubelirer		Transaction ID: SB21-EX4148 Date of Disbursement
Mailing Address PO Box 2051		0 4 M / D 2 5 / Y 2 0 0 6 Y
City Altoona	State Zip Code PA 16603	Amount of Each Disbursement this Period
Purpose of Disbursement Political Contributions	1 1000.00  Refund or Disposal of Excess Contributions Required Under	
Candidate Name	Cate Typ	11 C E D 400 F2
°	ment For: 2006 Primary General Other (specify)	Political Contributions
SUBTOTAL of Disbursements This Page (optional)		1300.00
TOTAL This Period (last page this line number only)		

## SCHEDULE B (FEC Form 3 )

5	SHEDDLE B (I LCI OIIII 3 )	Use seperate schedule(s)		E NUMBER: PAGE 21/26
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check on	ny one)  17
	y Information copied from such Reports and State for commercial purposes, other than using the nar			
VI.	NAME OF COMMITTEE (In Full)	le and address of any political	i committee to so	Shelt contributions from Such committee
$\rangle$	Bill Shuster for Congress			
_	Full Name (Last, First, Middle Initial)			Transaction ID: SB21-EX4101
Α.	Daily American	Date of Disbursement		
	Mailing Address 334 W Main Street PO Box 638			04
	City Somerset	State Zip Code PA 15501		Amount of Each Disbursement this Period
	Purpose of Disbursement	PA 15501		2000.00
	Donations		012	Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
		sement For: 2006  C Primary General  Other (specify)		Donations
_	Full Name (Last, First, Middle Initial)			Transaction ID: CD01 EV4140
В.	Penn's Woods Council #508			Transaction ID: SB21-EX4140 Date of Disbursement
	Mailing Address PO Box 352			04 / 21 / 2006
	City Tire Hill	State Zip Code PA 15959		Amount of Each Disbursement this Period
	Purpose of Disbursement Promotional Tickets	90.00		
	Candidate Name	012 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
	Senate 2	sement For: 2006  C Primary General  Other (specify)		Donations
	State: District:			
C.	Full Name (Last, First, Middle Initial) Bistro Bis (Hotel George)			Transaction ID: SB21-EX4135 Date of Disbursement
	Mailing Address 15 E Street Northwest			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 1 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y \\ 2 & O & O & G \end{smallmatrix} \end{bmatrix}$
	City Washington	State Zip Code DC 20001		Amount of Each Disbursement this Period
	Purpose of Disbursement Political Contributions 011			1627.03  Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
		sement For: 2006  C Primary General  Other (specify)		Political Contributions
s	UBTOTAL of Disbursements This Page (optional		<b>&gt;</b>	3717.03
	-			3717.

SCHEDULE B (FEC Form 3)	Use seperate scriedule(s) (check on		E NUMBER: PAGE 22 / 26				
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		17				
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name							
NAME OF COMMITTEE (In Full)							
Bill Shuster for Congress							
Full Name (Last, First, Middle Initial)  The Second Mile			Transaction ID: SB21-EX4093 Date of Disbursement				
Mailing Address 1402 S. Atherton Street			$\begin{bmatrix} \begin{smallmatrix} M & 4 & M \\ 0 & 4 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 5 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{smallmatrix} Y$				
	State Zip Code PA 16801		Amount of Each Disbursement this Period				
Purpose of Disbursement Donations		010	275.00				
Candidate Name		012 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53				
Senate X President	ement For: 2006 Primary General Other (specify)		Donations				
State: District: Full Name (Last, First, Middle Initial)			I- ODO4 5V4400				
Daily American Challenge			Transaction ID: SB21-EX4102 Date of Disbursement				
Mailing Address PO Box 638	04 11 2006						
,	State Zip Code PA 15501		Amount of Each Disbursement this Period				
Purpose of Disbursement Donations	012	200.00  Refund or Disposal of Excess					
Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53				
Senate X President	ement For: 2006 Primary General Other (specify)		Donations				
State: District:							
Full Name (Last, First, Middle Initial) Fulton County Republican Committee			Transaction ID: SB21-EX4100 Date of Disbursement				
Mailing Address PO Box 432	Mailing Address PO Box 432						
	State Zip Code PA 17229		Amount of Each Disbursement this Period				
Purpose of Disbursement Promotional Tickets							
Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53				
Senate X President	ement For: 2006 Primary General Other (specify)		Donations				
State: District:							
SUBTOTAL of Disbursements This Page (optional) .		<b>)</b>	575.00				
TOTAL This Period (last page this line number only)							

3(	CHEDULE B (FEC Form 3)	Use seperate schedule(s)	_	NUMBER: PAGE 23 / 26
ΙT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only	y one) 17 18 19a 19b 20a 20b 20c X 21
	y Information copied from such Reports and Statem or commercial purposes, other than using the name			
$\rangle$	NAME OF COMMITTEE (In Full) Bill Shuster for Congress			
Α.	Full Name (Last, First, Middle Initial) Patricia Raugh for State Committee			Transaction ID: SB21-EX4150 Date of Disbursement
	Mailing Address 715 Lexington Avenue			$\begin{bmatrix}\begin{smallmatrix}M\\04\end{smallmatrix}^M & \begin{smallmatrix}D\\25\end{smallmatrix}\end{bmatrix} \begin{smallmatrix}Y\\2006\end{smallmatrix}^Y$
		State Zip Code PA 16601		Amount of Each Disbursement this Period
	Purpose of Disbursement Political Contributions Candidate Name		011 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
		ment For: 2006 Primary General Other (specify)	Турс	Political Contributions
В.	Full Name (Last, First, Middle Initial) Judy Ward for State Committee			Transaction ID: SB21-EX4149 Date of Disbursement  O 4
	Mailing Address Allegheny Lutheran Social Ministr 915 Hickory Street			04 25 2006
	,	State Zip Code PA 16648		Amount of Each Disbursement this Period
	Purpose of Disbursement Political Contributions Candidate Name	011 Category/	750.00  Refund or Disposal of Excess Contributions Required Under	
		ment For: 2006 Primary General Other (specify)	Туре	11 C.F.R. 400.53  Political Contributions
C.	Full Name (Last, First, Middle Initial) Bruce Erb for State Committee			Transaction ID: SB21-EX4151 Date of Disbursement
	Mailing Address 109 Allegheny Court			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 5 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Q & Q & G \\ Y & 2 & 0 & Q & G \end{bmatrix}$
		State Zip Code PA 16648		Amount of Each Disbursement this Period
	Purpose of Disbursement Political Contributions Candidate Name O1 Category			750.00  Refund or Disposal of Excess Contributions Required Under
		mont For: 0000	Type	11 C.F.R. 400.53
		ment For: 2006 Primary General Other (specify)		Political Contributions
S	JBTOTAL of Disbursements This Page (optional) .			2250.00

## Image# 26960083134

## SCHEDULE B (FEC Form 3 )

FOR LINE NUMBER: PAGE 24/26 Use seperate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the Detailed Summary Page 18 19b 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicating contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) Bill Shuster for Congress Full Name (Last, First, Middle Initial) Transaction ID: SB21-EX4152 Wayne Hippo for State Committee Date of Disbursement 25 o<sup>™</sup>4 2006 Mailing Address 109 Allegheny Court City State Zip Code Amount of Each Disbursement this Period Hollidaysburg PA 16648 750.00 Purpose of Disbursement Political Contributions 011 Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type 2006 Office Sought: Disbursement For: House **Political Contributions** Senate X Primary General President Other (specify) State: District:

		750.00
SUBTOTAL of Disbursements This Page (optional)		750.00
TOTAL This Period (last page this line number only)	_	9362.03
TOTAL This Period (last page this line number only)	-	300E.00

## SCHEDULE D (FEC Form 3 ) D E

(Use separate

PAGE 25 / 26

DEBTS AND OBLIGATIONS		schedule(s) for each	(check only one) 9
Excluding Loans		numbered line)	X 10
NAME OF COMMITTEE (In Full)			
Bill Shuster for Congress			
A. Full Name (Last, First, Middle Initial) of Debtor	or Creditor	Nature of	Debt (Purpose):
Covington & Burling			Invoice 60339388
Mailing Address 1201 Pennsylvania Avenue,	NIM	Adminis	nanve
Walling Address 1201 Fermsylvania Avenue,	INVV		
City State	ZIP Code		
Washington DC	20004		
Outstanding Balance Beginning This Period		Tr	ansaction ID: SD10-INV3289
15000.00			
Amount Incurred This Period	Payment This Period	Outstand	ding Balance at Close of This Period
.00	7500.00		7500.00
B. Full Name (Last, First, Middle Initial) of Debtor of	or Creditor	Nature of	Debt (Purpose):
McIntyre's Candies			Gift Basket Admi-
Mailing Address 1419 Eleventh Avenue		Tilotiative	S/Odia
Walling Address 1419 Eleverith Avenue			
City State	ZIP Code		
Altoona PA	16601		
Outstanding Balance Beginning This Period		Tr	ansaction ID: SD10-INV4015
.00			
Amount Incurred This Period	Payment This Period	Outstand	ding Balance at Close of This Period
40.00	.00	)	40.00
C. Full Name (Last, First, Middle Initial) of Debtor of	or Creditor		Debt (Purpose):
Verizon Wireless		Invoice: Adminis	519688059-00001 trative/
Mailing Address PO Box 17464			
City State Baltimore MD	ZIP Code 21297		
Outstanding Balance Beginning This Period	21201		reneation ID. CD10 INV/4010
		ır	ansaction ID: SD10-INV4013
.00			
Amount Incurred This Period	Payment This Period	Outstand	ding Balance at Close of This Period
80.51	.00.	)	80.51
1) SUBTOTALS This Period This Page (optional)		. •	7620.51
2) TOTALS This Period (last page this line number or		_ =	7620.51
_,		<u> </u>	
3) TOTALS OUTSTANDING LOANS from Schedule	e C (last page only)	_ •	· · · · · · · · · · · · · · · · · · ·
4) ADD 2) and 3) and carry forward to appropriate lin	ne of Summary Page (last page only)	) 🕨 🔼	

## Image# 26960083136

Form/Schedule: **F3N**Transaction ID:

The accompanying Report of Receipts and Disbursements from April 1, 2006 through April 26, 2006 for the Bill Shuster for Congress Committee included in the prescribed form have been prepared by Frederick A. Ciocca, CPA. I have prepared such finanical statements in my capacity as treasurer of the Bill Shuster for Congress Committ-